



# NOMINATION FORM

## Mental Health Commission and Department of Mental Health

### 14<sup>th</sup> Annual Mental Health Commission Profiles of Hope Volunteer and Program Recognition Awards Thursday, October 24, 2013 ~ Catalina's Grill

Each year the Los Angeles County Mental Health Commission provides an opportunity to honor outstanding members of the mental health community at a celebrity event. Your participation is requested in helping to identify colleagues and peers that you feel have shown exemplary commitment in one the following categories: (Make your choice by placing an "X" in one box.)

(One submission per agency per category)

<input type="checkbox"/>	Outstanding Family Member
<input type="checkbox"/>	Outstanding Consumer
<input type="checkbox"/>	Outstanding Program (Directly Operated or Contract Agency)
<input type="checkbox"/>	Personal Legacy (Individual who has had the most profound impact on improving the quality of the mental health service delivery system)

Name of Nominee or Program:		
Nominee's Organization (if appropriate):		
Address:		
City:		Zip Code:
Contact Phone:	Fax:	Email:

**How would you best describe the primary contribution of this individual or program: Make your choice by placing an "X" in the box.**

<input type="checkbox"/>	Improving current services	<input type="checkbox"/>	Increasing partnership & collaboration
<input type="checkbox"/>	Reducing stigma	<input type="checkbox"/>	Passing legislation
<input type="checkbox"/>	Increasing awareness	<input type="checkbox"/>	Developing/implementing a new program

Name of person making the nomination:		
Address:		
City:		Zip Code:
Contact Phone:	Fax:	Email:

**Your participation in this process is voluntary, but greatly appreciated.**

Name of Nominee:

Person making nomination:

Use the space provided below to describe in detail why this individual or program should be recognized. You may fax the completed form to 213 738-2120, email, [mentalhealthcommission@dmh.lacounty.gov](mailto:mentalhealthcommission@dmh.lacounty.gov) or mail to Mental Health Commission, 550 S. Vermont Ave., Los Angeles, CA 90012. Click link <http://dmh.lacounty.info/mhc/> to fill in the form on the web page under events. **Deadline for nominations is the week of July 27, 2013.** Finalist will be notified within two weeks. The awards program will be held Thursday, October 24, 2013 at Catalina's Grill, 6725 W. Sunset Blvd., #100, Los Angeles, 90028 from 6 pm – 9 pm. If you have questions regarding the form, contact the Mental Health Commission at 213 738-4772.

PLEASE TYPE OR PRINT LEGIBLY, MAXIMUM 100 WORDS.
